



FLAG REQUEST FORM

DATE: _____

REQUESTOR CONTACT INFORMATION: RECIPIENT CONTACT INFORMATION:
(Flag will be mailed to this address)

Name: _____ Name: _____
Street Address: _____ Street Address: _____
City, State, Zip: _____ City, State, Zip: _____
Daytime Phone: _____ Daytime Phone: _____
Email: _____ Email: _____

FLAG CERTIFICATE INFORMATION:

RECIPIENT NAME: _____ DATE FLAG IS TO BE FLOWN: _____
(If flag is to be flown on a specific date)

OCCASION OR SUGGESTED TEXT:

SIZE	FABRIC	QUANTITY	TOTAL
3x5	Nylon	# _____ @ \$9.00	\$ _____
3x5	Cotton	# _____ @ \$9.25	\$ _____
4x6	Nylon	# _____ @ \$13.50	\$ _____
5x8	Nylon	# _____ @ \$18.00	\$ _____
5x8	Cotton	# _____ @ \$20.00	\$ _____
(Fee is per flag)	Shipping Fee	# _____ @ \$4.00 each	\$ _____
(Fee is per flag)	Flag Flying Fee	# _____ @ \$4.05 each	\$ _____

(make checks payable to: **Keeper of the Stationary**)

TOTAL COST \$ _____

Please mail form and check to:
OFFICE OF SEN. JOHN HOEVEN
ATTN: FLAG COORDINATOR
DIRKSEN SENATE OFFICE G-11
WASHINGTON DC 20510

PLEASE NOTE: if you have questions regarding flag requests, please call **(202) 224-4224**. All fees are determined by the U.S. Capitol Flag Office and checks or money orders should be made out to: **“Keeper of the Stationery.”** Your order cannot be processed until we have received both your check and order form. Due to the high demand for flags, please allow **6 to 8 weeks** for delivery after the date the flag is flown.